

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. MIKE ROSS FOR CONGRESS COMMITTEE

Mailing Address PO BOX 360

City
PRESCOTT

State
AR

Zip Code
71857-0360

Purpose of Disbursement
MIKE ROSS

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: AR District: 4

Transaction ID: SB23.66042

Date of Disbursement

MM / DD / YYYY
08 / 24 / 2006

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. MIKE THOMPSON FOR CONGRESS COMMITTEE

Mailing Address 442 NEW JERSEY AVE S.E.

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
MIKE THOMPSON

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 01

Transaction ID: SB23.66072

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MIKE WEAVER FOR CONGRESS

Mailing Address PO BOX 807

City
RADCLIFF

State
KY

Zip Code
40159-0807

Purpose of Disbursement
MIKE WEAVER

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: KY District: 02

Transaction ID: SB23.66129

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)